

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) or Patentee(s): McCABE, GEOFFREY L.

Appl. or Patent No.: Not yet assigned

Filed or Issued: Concurrently herewith

For: "TUNING MEANS FOR STRINGED MUSICAL INSTRUMENT"

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS [37 CFR §1.9(f) and §1.27(b)] - INDEPENDENT INVENTOR(S)**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR §1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention described in

☒ [X] the specification filed herewith

☐ [] Application Serial No. _____, filed _____

☐ [] U.S. Patent No. _____, issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR §1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR §1.9(d) or a non-profit organization under 37 CFR §1.9(e).

Each person, concern, organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☒ [X] no such person, concern, or organization

☐ [] persons, concerns or organizations listed below*

FULL NAME:

ADDRESS :

☐ [] INDIVIDUAL

☐ [] SMALL BUSINESS CONCERN

☐ [] NON-PROFIT ORGANIZATION

FULL NAME:

ADDRESS :

☐ [] INDIVIDUAL

☐ [] SMALL BUSINESS CONCERN

☐ [] NON-PROFIT ORGANIZATION

FULL NAME:

ADDRESS :

☐ [] INDIVIDUAL

☐ [] SMALL BUSINESS CONCERN

☐ [] NON-PROFIT ORGANIZATION

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR §1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, or any patent issued thereon, or any patent to which this verified statement is directed.

GEOFFREY L. McCABE
Name of Inventor

Signature of Inventor

Date

10/9/97

00953002-10169

DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention entitled:

the specification of which [check one(s) applicable]

___ was filed _____ as PCT International/U.S. Application No. _____

___ and was amended by Amendment filed _____ (if applicable); [or];

☒ is attached to this Declaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Rule 56(a) [37CFR§1.56(a)].

CLAIM UNDER 35 USC §120: I hereby claim the benefit under 35 USC §120 of the prior United States application(s) listed below:

<u>Prior U.S. Application(s)</u>	<u>Filing Date</u> <u>Day/Mo/Year</u>	<u>Status</u> <u>Pending-Patented-Abandoned</u>
08/027,729	14 JAN 93	PENDING
07/607,458	31 OCT 90	PATENTED

Insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 USC §112, I acknowledge the duty to disclose material information as defined in Rule 56(a) [37 CFR §1.56(a)] which occurred between the filing date of the prior U.S. application and the national or PCT international filing date of this application.

POWER OF ATTORNEY: As inventor, I hereby appoint **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA, and the following individual(s) as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Roger W. Herrell, Reg. No. 22,964, Stephen H. Eland, Reg. 41,010 and Henry H. Skillman, Reg. No. 17,352**

POWER TO INSPECT: I hereby give **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

SEND CORRESPONDENCE TO: CUSTOMER NO. 000110

DIRECT INQUIRIES TO: STEPHEN H. ELAND; Telephone (215) 563-4100/Facsimile (215) 563-4044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST JOINT INVENTOR

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First Middle Last

Signature [Signature]

Date 10/9/97

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SECOND JOINT INVENTOR (if any)

Full Name _____
First Middle Last

Signature _____

Date _____

Residence _____

City State or Country

Citizenship _____

Post Office Address:

City State or Country Zip Code

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